

PROJECT 10073 RECORD

1. DATE - TIME GROUP 19 Mar 67 20/0230Z	2. LOCATION Stratford, Conn. (2 Witnesses)
3. SOURCE Civilian	10. CONCLUSION Possible (AIRCRAFT)
4. NUMBER OF OBJECTS One	No data presented to indicate object could not have been an A/C.
5. LENGTH OF OBSERVATION 1 Minute	11. BRIEF SUMMARY AND ANALYSIS Object appeared as an automotive headlight. White with a bluish light. The blue light that was in the middle pulsed. Object traveled from SE - SW in a straight line. Observer was a youth of 11 years old.
6. TYPE OF OBSERVATION Ground-Visual	
7. COURSE SE - SW	
8. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. PHYSICAL EVIDENCE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

FORM

FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

NO

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes

No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses:

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

AGE

SEX

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

Day

Month

Year

34. Date you completed this questionnaire:

SATURDAY MAY 1967
Day Month Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

IT HAD A BLUE PULSATING
LIGHT IN THE MIDDLE.

IT WAS GLOWING

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

12 May 1967
Day Month Year

2. Time of day:

11 5
Hour Minutes

(Circle One): A.M. or P.M.

3. Time Zone:

(Circle One): a. Eastern
b. Central
c. Mountain
d. Pacific
e. Other

(Circle One): a. Daylight Saving
b. Standard

4. Where were you when you saw the object?

[REDACTED] Ontario Richland
Nearest Postal Address City or Town State or County

5. How long was object in sight? (Total Duration)

30 ✓
Hours Minutes Seconds

a. Certain

c. Not very sure

b. Fairly certain

d. Just a guess

5.1 How was time in sight determined?

Guess

5.2 Was object in sight continuously?

Yes ✓ No

6. What was the condition of the sky?

DAY

a. Bright
b. Cloudy

NIGHT

a. Bright
b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One): a. In front of you
b. In back of you
c. To your right

d. To your left
e. Overhead
f. Don't remember

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- ☒ b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- a. Bright moonlight
- b. Dull moonlight
- ☒ c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- a. Clear sky
- b. Hazy
- ☒ c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- ☒ a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- ☒ d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- ☒ a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

A very, very bright light bulb. ✓

12. The edges of the object were:

- (Circle One)
- ☒ a. Fuzzy or blurred
 - b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

e. Other _____

13. Did the object:

(Circle One for each question)

- | | | | |
|---|--------------------------------------|-------------------------------------|------------|
| a. Appear to stand still at any time? | <input checked="" type="radio"/> Yes | <input type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | Yes | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode? | Yes | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke? | Yes | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness? | Yes | <input checked="" type="radio"/> No | Don't know |
| f. Change shape? | Yes | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker? | Yes | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear? | Yes | <input checked="" type="radio"/> No | Don't know |

14. Did the object disappear while you were watching it? If so, how?

Slowly veered off to the North.

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

it moved behind: _____

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

☒ No

Don't Know.

IF you answered YES, then tell what

in front of: _____

17. Tell in a few words the following things about the object:

a. Sound *NO SOUND*

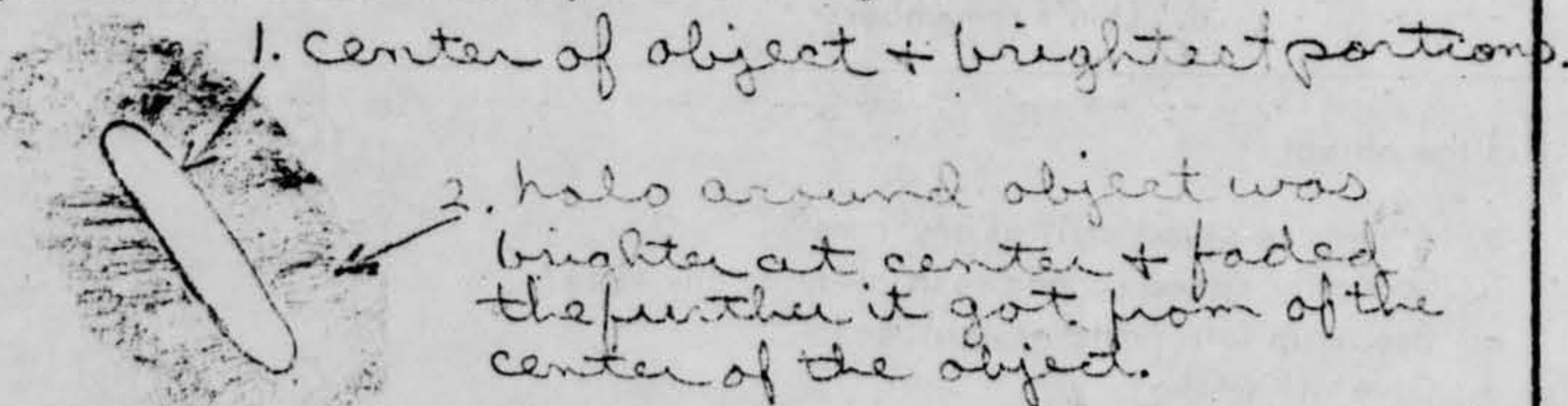
b. Color *BRIGHT WHITE*

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

a very small portion of the object.

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.



20. Do you think you can estimate the speed of the object?

(Circle One)

Yes

☒ No

IF you answered YES, then what speed would you estimate? _____

21. Do you think you can estimate how far away from you the object was?

(Circle One)

Yes

☒ No

IF you answered YES, then how far away would you say it was? _____

22. Where were you located when you saw the object?
(Circle One):

- a. Inside a building
- ☒ b. In a car
- c. Outdoors
- d. In an airplane (type)
- e. At sea
- f. Other _____

23. Were you (Circle One)

- a. In the business section of a city?
- b. In the residential section of a city?
- ☒ c. In open countryside?
- d. Near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? (Circle One)

- | | | | |
|--------------|--------------|--------------|--|
| a. North | c. East | e. South | <input checked="" type="radio"/> g. West |
| b. Northeast | d. Southeast | f. Southwest | h. Northwest |

24.2 How fast were you moving? 50 miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

☒ No

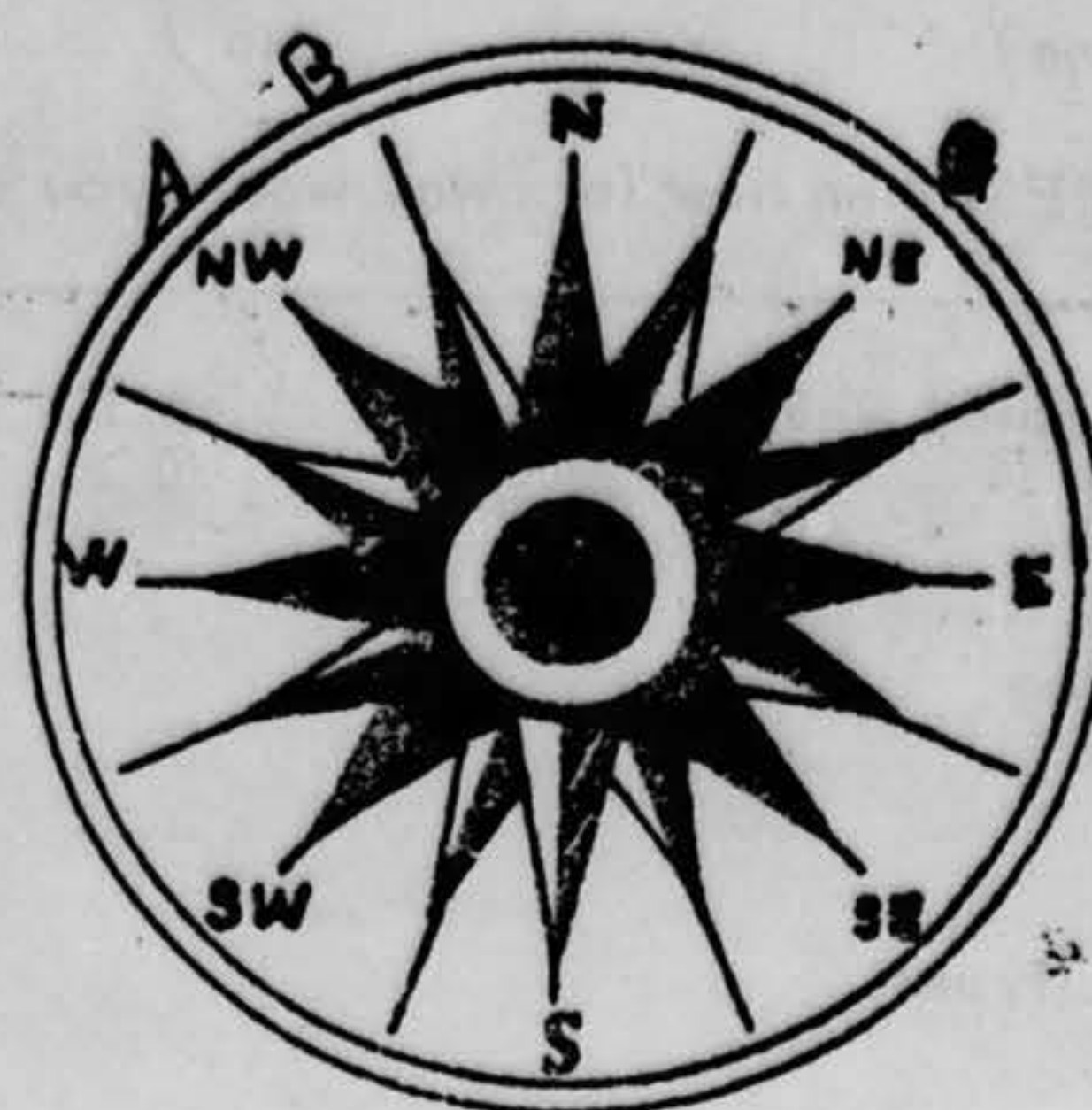
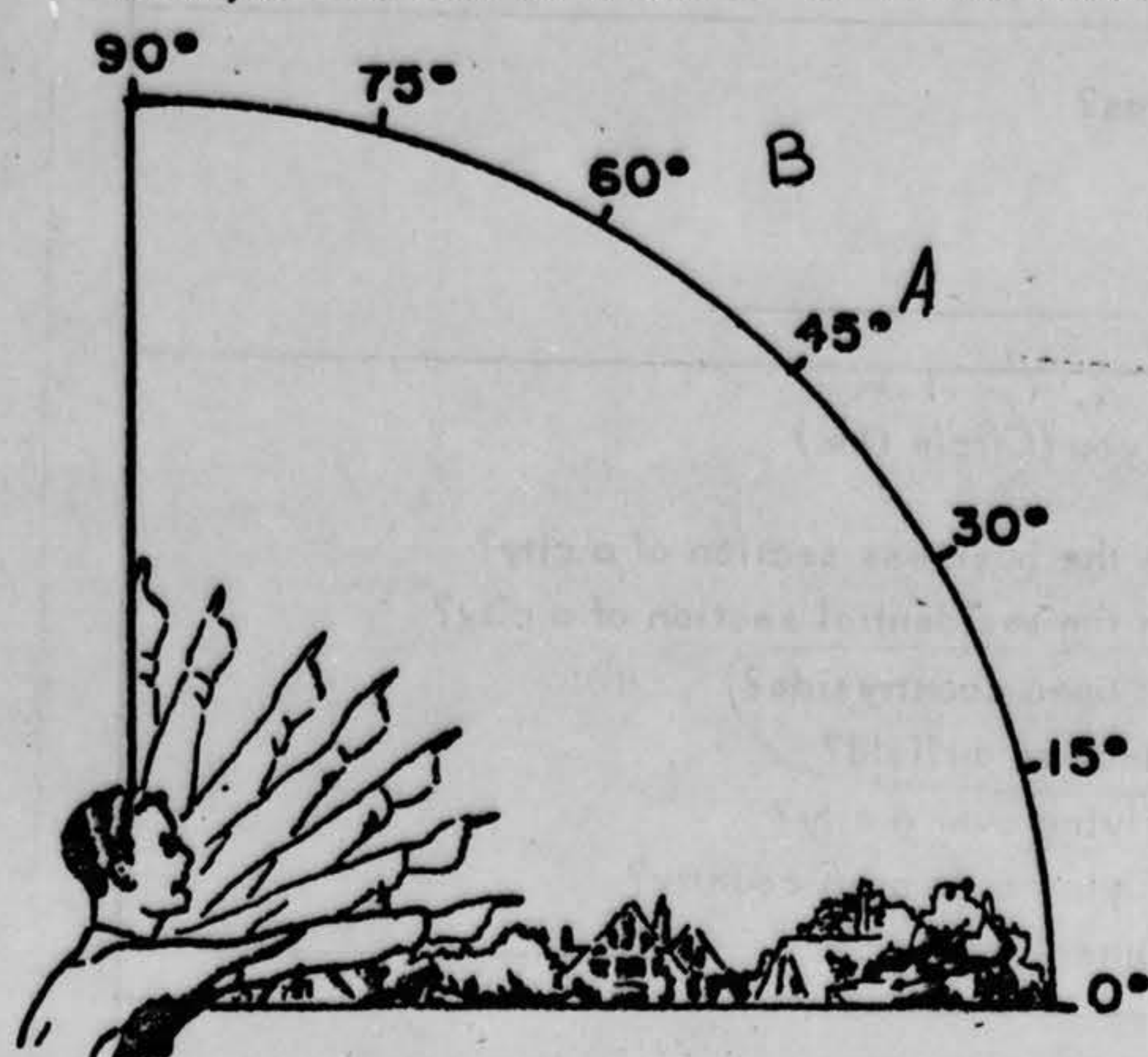
25. Did you observe the object through any of the following?

- | | | | | | |
|-----------------|--------------------------------------|-------------------------------------|----------------|-----|-------------------------------------|
| a. Eyeglasses | <input checked="" type="radio"/> Yes | <input type="radio"/> No | e. Binoculars | Yes | <input checked="" type="radio"/> No |
| b. Sun glasses | <input checked="" type="radio"/> Yes | <input type="radio"/> No | f. Telescope | Yes | <input checked="" type="radio"/> No |
| c. Windshield | <input checked="" type="radio"/> Yes | <input type="radio"/> No | g. Theodolite | Yes | <input checked="" type="radio"/> No |
| d. Window glass | Yes | <input checked="" type="radio"/> No | h. Other _____ | | |

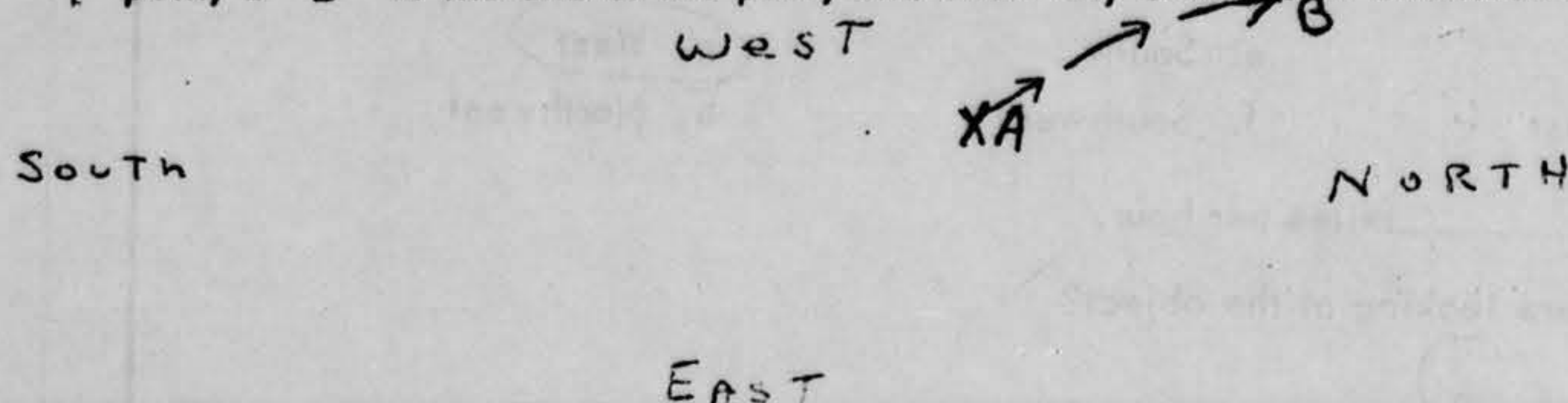
26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

a bright illuminated cigarette with rounded edges.

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



29. IF there was MORE THAN ONE object, then how many were there? _____

Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

30. Have you ever seen this, or a similar object before. If so give date or dates and location.

31. Was anyone else with you at the time you saw the object? (Circle One)

Yes

No

31.1 IF you answered YES, did they see the object too? (Circle One)

Yes

No

31.2 Please list their names and addresses

Galion Ohio 44833

32. Please give the following information about yourself:

NAME

Last Name

First Name

Middle Name

ADDRESS

Street

City

Zone

State

TELEPHONE NUMBER

AGE 19

SEX

MALE

Indicate any additional information about yourself, including any special experience, which might be pertinent.

33. When and to whom did you report that you had seen the object?

13

Day

May

Month

1967

Year

*Called
Wright Patterson AFD, Ohio
12:30 AM.*

34. Date you completed this questionnaire:

26
Day

May
Month

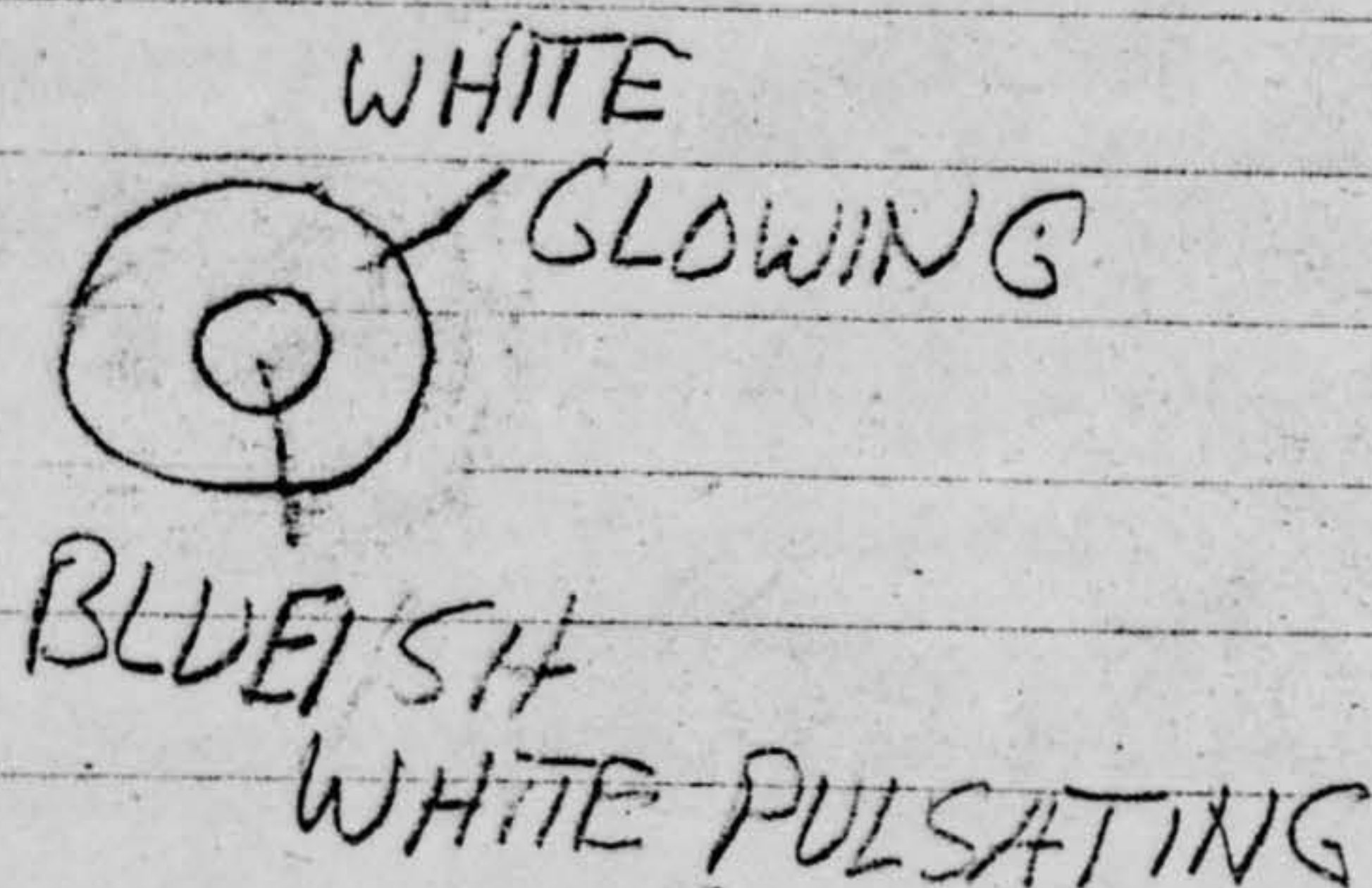
1967
Year

35. Information which you feel pertinent and which is not adequately covered in the specific points of the questionnaire or a narrative explanation of your sighting.

~~Stratford, Conn.~~
Stratford, Conn.
May 8, 1967 0649

Dear Sirs:

On March 19, 1967, at 9:15 I sighted
a U.F.O. about 15 feet in diameter.
It was coming from the mouth of
the Housatonic River heading for
the airport. I went over the
airport toward the Long Island
Sound. This is a picture of
it.



Please answer. Thank you

Sincerely,

~~Stratford, Conn.~~
P.S. Will you send me some pictures

of U.F.O.s

possible A/C *19 Mar 67*

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS FOREIGN TECHNOLOGY DIVISION (AFSC)
WRIGHT-PATTERSON AIR FORCE BASE, OHIO 45433



REPLY TO
ATTN OF: TDET/UFO

25 May 1967

SUBJECT: UFO Observation , 19 March 1967

TO: *Mr. C. [redacted]*
[redacted]
Stratford, Connecticut 06497

Reference your unidentified observation. The information which we have received is not sufficient for a scientific evaluation. Request you complete the attached FTD Form 164 and return it in the envelope provided. Thank you for reporting your observation to the Air Force.

TDET/UFO official file copy

[Signature]
JAMES C. MANATT, Colonel, USAF
Director of Technology and Subsystems

1 Atch
FTD Form 164 w/envelope

Poss c/c
Poss meters if duration < 1 min.

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?

SUNDAY March 1967
Day Month Year

2. Time of day:

9 30
Hour Minutes

(Circle One):

A.M.

or

P.M.

3. Time Zone:

(Circle One):

- a. Eastern
- b. Central
- c. Mountain
- d. Pacific
- e. Other _____

(Circle One):

- a. Daylight Saving
- b. Standard

4. Where were you when you saw the object?

[REDACTED]
Nearest Postal Address

STRATFORD
City or Town

CONN.
State or County

5. How long was object in sight? (Total Duration)

Hours

1
Minutes

Seconds

a. Certain

b. Fairly certain

c. Not very sure

d. Just a guess

5.1 How was time in sight determined?

BY A CLOCK

5.2 Was object in sight continuously?

Yes

X

No

6. What was the condition of the sky?

DAY

- a. Bright
- b. Cloudy

NIGHT

- a. Bright
- b. Cloudy

7. IF you saw the object during DAYLIGHT, where was the SUN located as you looked at the object?

(Circle One):

- a. In front of you
- b. In back of you
- c. To your right

- d. To your left
- e. Overhead
- f. Don't remember.

8. IF you saw the object at NIGHT, what did you notice concerning the STARS and MOON?

8.1 STARS (Circle One):

- a. None
- ☒ b. A few
- c. Many
- d. Don't remember

8.2 MOON (Circle One):

- ☒ a. Bright moonlight
- b. Dull moonlight
- c. No moonlight - pitch dark
- d. Don't remember

9. What were the weather conditions at the time you saw the object?

CLOUDS (Circle One):

- ☒ a. Clear sky
- b. Hazy
- c. Scattered clouds
- d. Thick or heavy clouds

WEATHER (Circle One):

- ☒ a. Dry
- b. Fog, mist, or light rain
- c. Moderate or heavy rain
- d. Snow
- e. Don't remember

10. The object appeared: (Circle One):

- a. Solid
- b. Transparent
- c. Vapor
- ☒ d. As a light
- e. Don't remember

11. If it appeared as a light, was it brighter than the brightest stars? (Circle One):

- ☒ a. Brighter
- b. Dimmer
- c. About the same
- d. Don't know

11.1 Compare brightness to some common object:

CAR HEADLIGHT

12. The edges of the object were:

- (Circle One):
- a. Fuzzy or blurred
 - b. Like a bright star
 - c. Sharply outlined
 - d. Don't remember

e. Other

GLOWING

13. Did the object:

(Circle One for each question)

- | | | | |
|---|--------------------------------------|-------------------------------------|------------|
| a. Appear to stand still at any time? | <input checked="" type="radio"/> Yes | <input type="radio"/> No | Don't know |
| b. Suddenly speed up and rush away at any time? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Don't know |
| c. Break up into parts or explode? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Don't know |
| d. Give off smoke? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Don't know |
| e. Change brightness? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Don't know |
| f. Change shape? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Don't know |
| g. Flash or flicker? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Don't know |
| h. Disappear and reappear? | <input type="radio"/> Yes | <input checked="" type="radio"/> No | Don't know |

14. Did the object disappear while you were watching it? If so, how?

IT WENT BEHIND A
HOUSE

15. Did the object move behind something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

it moved behind:

A HOUSE

16. Did the object move in front of something at any time, particularly a cloud?

(Circle One):

Yes

No

Don't Know.

IF you answered YES, then tell what

in front of:

17. Tell in a few words the following things about the object:

a. Sound

NO

b. Color

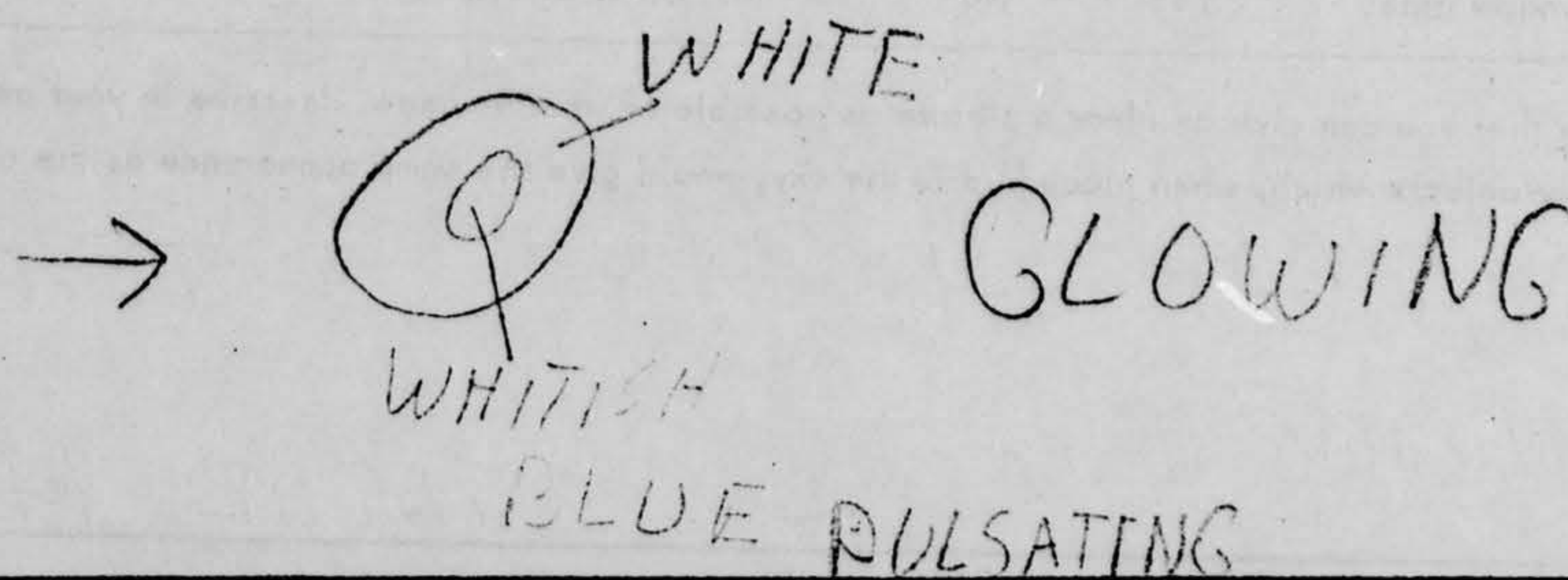
WHITE WITH A WHITISH BLUE LIGHT

18. We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?

ABOUT 3/4 OF IT

19. Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails.

Place an arrow beside the drawing to show the direction the object was moving.



20. Do you think you can estimate the speed of the object?

(Circle One)

☒ Yes

No

IF you answered YES, then what speed would you estimate? 50 MPH

21. Do you think you can estimate how far away from you the object was?

(Circle One)

☒ Yes

No

IF you answered YES, then how far away would you say it was? 1 MILE

22. Where were you located when you saw the object?

(Circle One):

☒ a. Inside a building

b. In a car

c. Outdoors

d. In an airplane (type)

e. At sea

f. Other _____

23. Were you (Circle One)

☒ a. In the business section of a city?

☒ b. In the residential section of a city?

c. In open countryside?

d. Near an airfield?

e. Flying over a city?

f. Flying over open country?

g. Other _____

24. IF you were MOVING IN AN AUTOMOBILE or other vehicle at the time, then complete the following questions:

24.1 What direction were you moving? NOT IN ONE (Circle One)

a. North

c. East

e. South

g. West

b. Northeast

d. Southeast

f. Southwest

h. Northwest

24.2 How fast were you moving? _____ miles per hour.

24.3 Did you stop at any time while you were looking at the object?

(Circle One)

Yes

No

25. Did you observe the object through any of the following?

a. Eyeglasses

Yes

No

e. Binoculars

Yes

No

b. Sun glasses

Yes

No

f. Telescope

Yes

No

c. Windshield

Yes

No

g. Theodolite

Yes

No

d. Window glass

☒ Yes

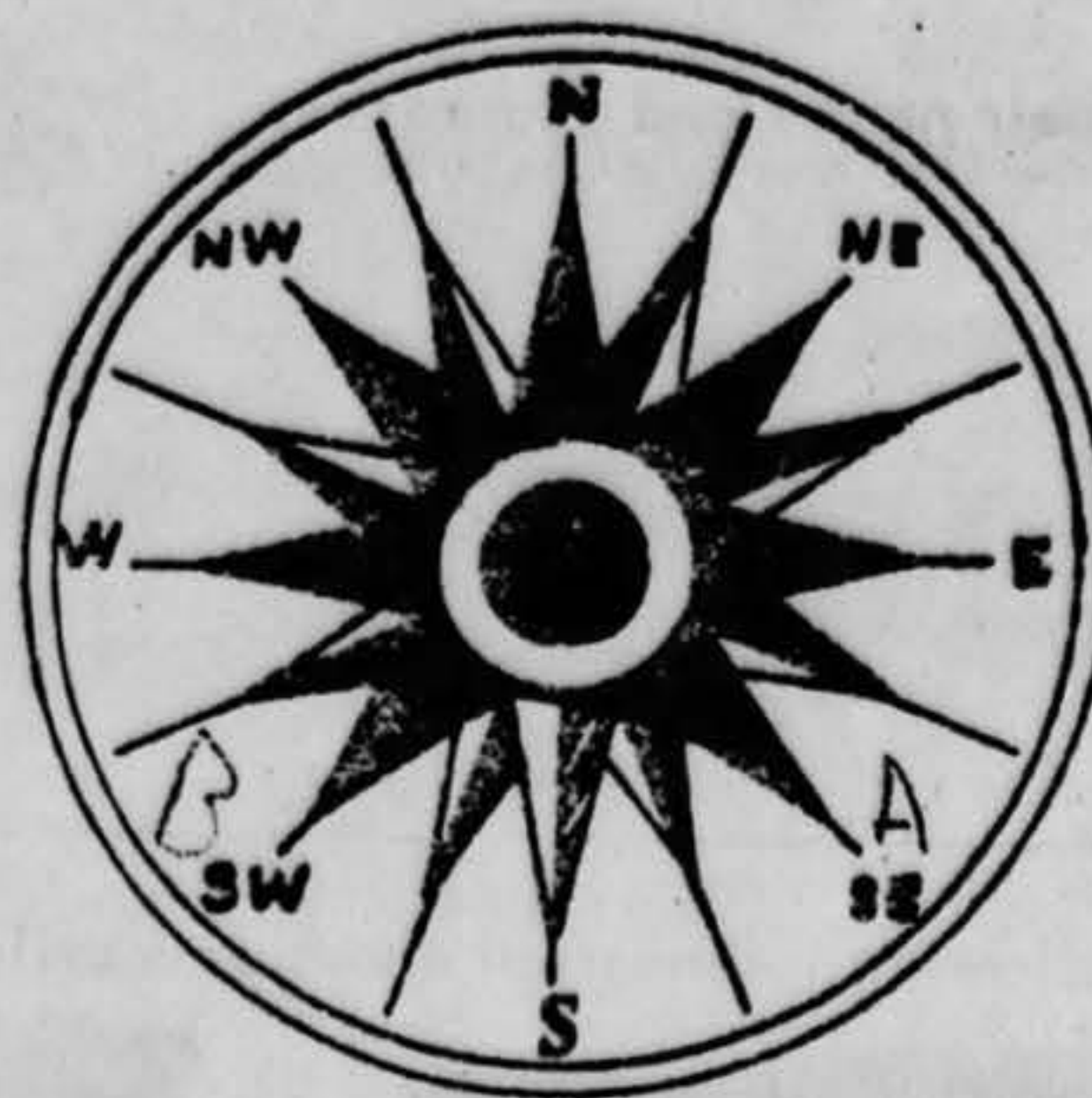
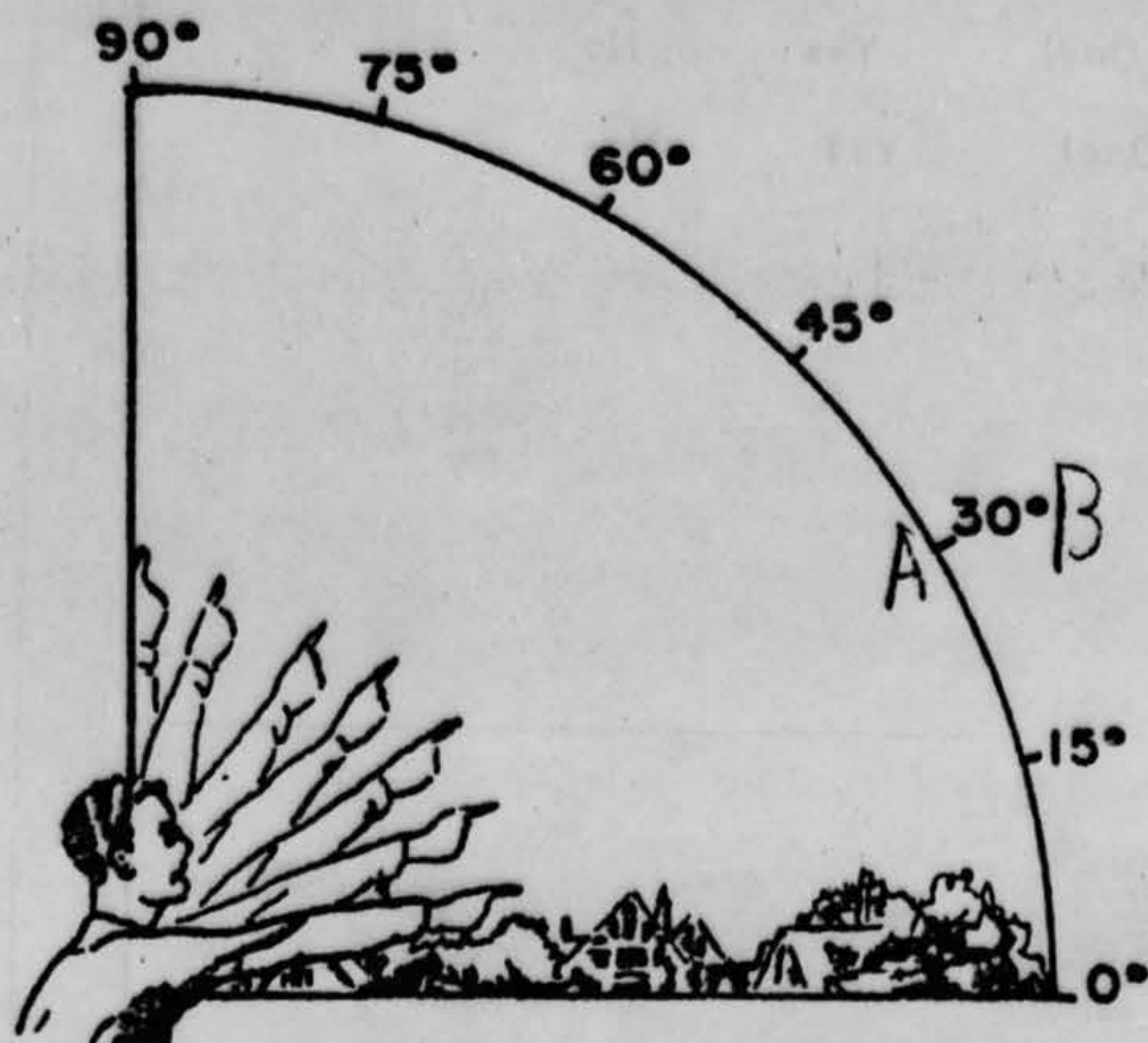
No

h. Other _____

26. In order that you can give as clear a picture as possible of what you saw, describe in your own words a common object or objects which, when placed up in the sky, would give the same appearance as the object which you saw.

A CAR HEADLIGHT WITH A BLUE
BLINKING FLASHLIGHT IN THE MIDDLE

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you *first* saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you *last* saw it. Place an "A" on the compass when you *first* saw it. Place a "B" on the compass where you *last* saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.

SE A - - - - - B

29. IF there was MORE THAN ONE object, then how many were there? ONE
Draw a picture of how they were arranged, and put an arrow to show the direction that they were traveling.

THERE WAS ONE